

Work Order ID 87819

Friday, July 13, 2012 1:30:03 PM

87819

Page 1

Item ID: D4277-3

Accept

N9000040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Rib

Start Date: 7/16/2012 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 8/3/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: *MF* Date: *12-07-13* Tooling:

Run Start ***NR1***

QC: Date: SPC (Y/N):

Date:

Stop ***NR2***

Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4277	D								
100		0.00							
100									
Large Fab	Memo	0.00							
Large Fab	1- Cut tube as per dwg D4277 2- Remove marking and deburr								
110	QC6- Inspect dimensions to drawing	0.00							
110									
QC	Memo	0.00							
Quality Control									
120	Identify as per dwg & Stock Location:	0.00							
120									
Packaging	Memo	0.00							
Packaging	***STOCK IN BASKET CELL***								

4 *SAD* *12-07-19*

4x *SS* *12-07-19*

4x *SS* *12-07-19*

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

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Page 2

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Revision ID:

Item Name: Rib

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Cust Item ID:

Required Date: 8/3/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start ***NR1***

QC: Date: SPC (Y/N): Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

QC21- Final Inspection - Work Order Release

0.00

130

QC

Memo

0.00

Quality Control

12/1/2012
mk
12-07-19

NCR: Yes / No

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Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
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Picklist Print

Friday, July 13, 2012 1:30:03 PM

Page 1

Work Order ID: 87819

Parent Item: D4277-3

Parent Item Name: Rib

Start Date: 7/16/2012

Required Date: 8/3/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A 10.11.12 new issue DD verf:EC
REV.C DD verf:EC

IPP Rev:B 11.01.20 AS PER DWG

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304TS0.500W.049 Square Tubing		Purchased	No			100	f	542.8963	0.52	0.5473684	2.1892	SAD 12-07-09	

Location

MAT034

Loc Qty

542.8962523

Loc Code

118460

0.00001534

121328

2.059994

121565

22.964943

121808

517.8713

2.1892

NCR: Yes / No

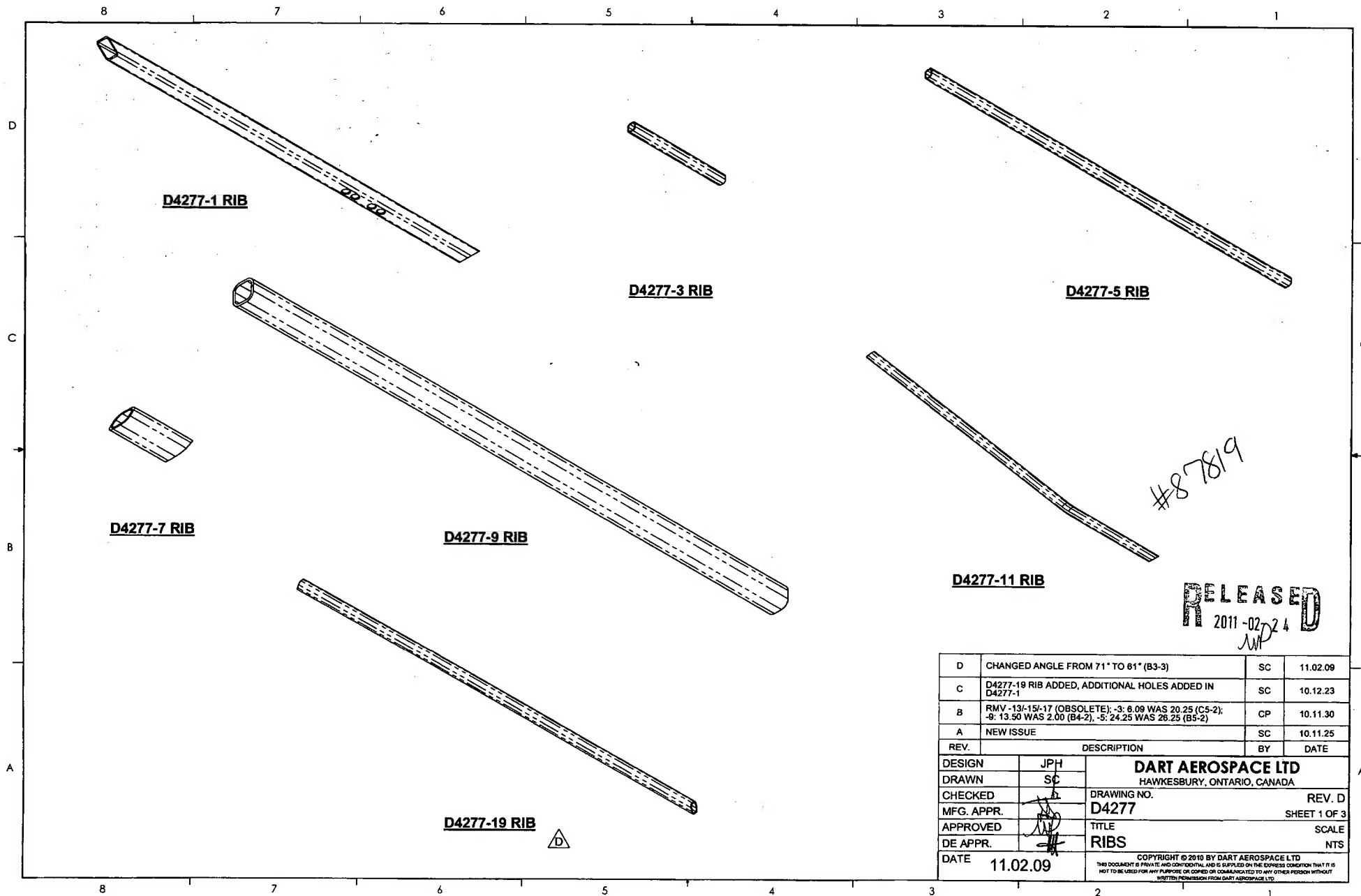
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D	CHANGED ANGLE FROM 71° TO 61° (B3-3)	SC	11.02.09
C	D4277-19 RIB ADDED, ADDITIONAL HOLES ADDED IN D4277-1	SC	10.12.23
B	RMV -13/-15/-17 (OBSOLETE); -3: 6.09 WAS 20.25 (CS-2); -9: 13.50 WAS 2.00 (B4-2); -5: 24.25 WAS 26.25 (B5-2)	CP	10.11.30
A	NEW ISSUE	SC	10.11.25
REV.	DESCRIPTION	BY	DATE
DESIGN	JPH	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	SC		
CHECKED		DRAWING NO.	REV. D
MFG. APPR.		D4277	SHEET 1 OF 3
APPROVED		TITLE	SCALE
DE APPR.		RIBS	NTS
DATE	11.02.09	COPYRIGHT © 2010 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

NCR: Yes / No

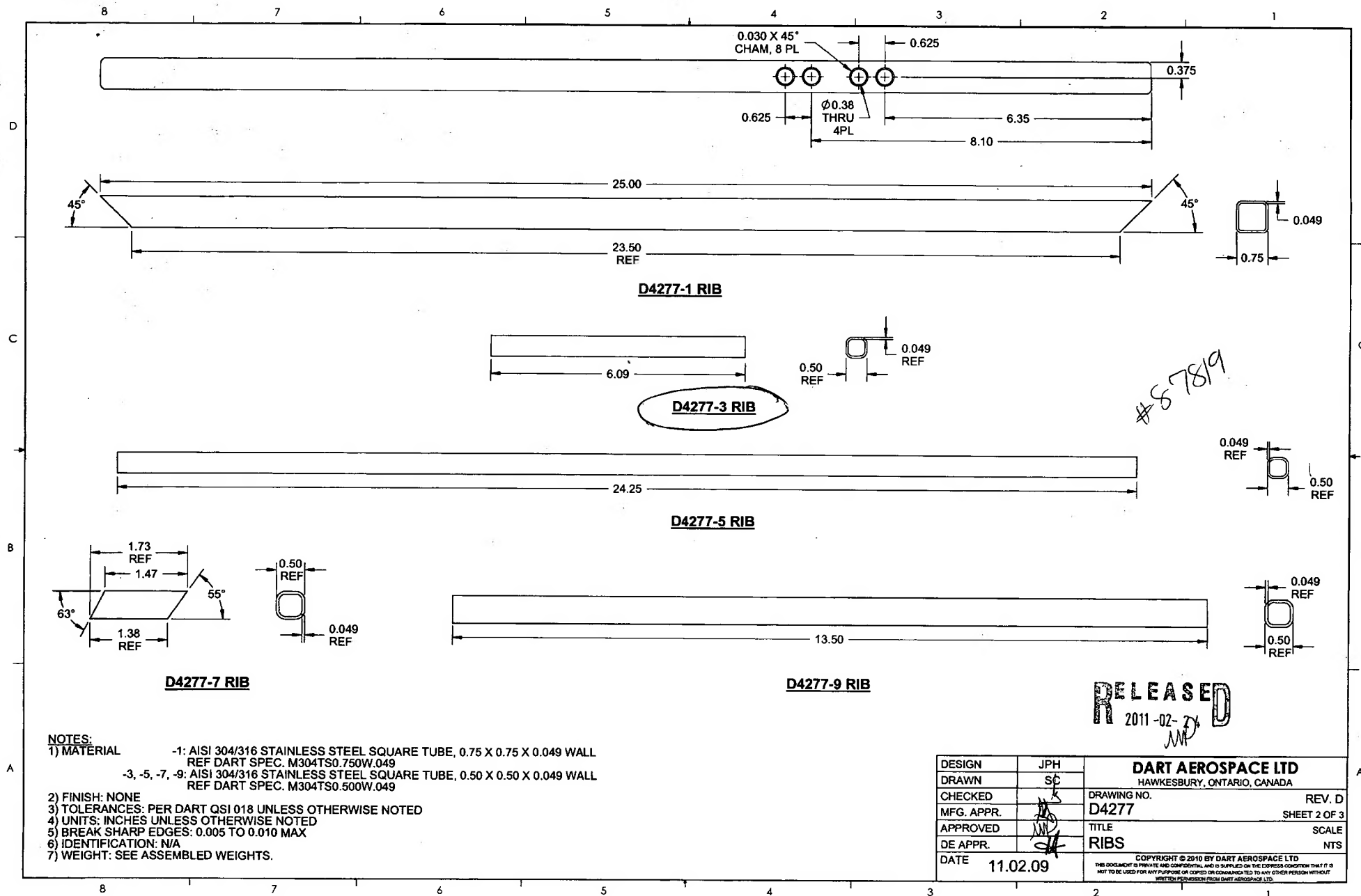
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NCR: Yes / No

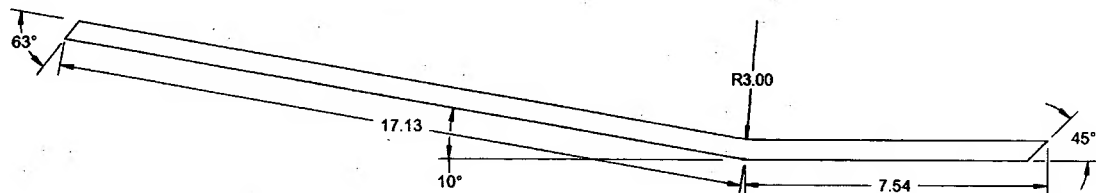
WORK ORDER NON-CONFORMANCE / UPDATE

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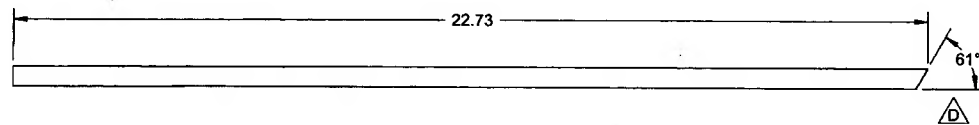
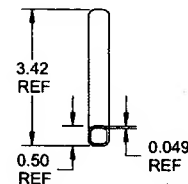
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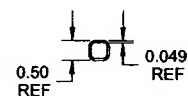
FAULT CATEGORY				
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D4277-11 RIB



D4277-19 RIB



#87819

RELEASED
2011-02-24

- NOTES:**
 1) MATERIAL -11, -19: AISI 304/316 STAINLESS STEEL SQUARE TUBE, 0.50 X 0.50 X 0.049 WALL
 REF DART SPEC. M304TS0.500W.049
 2) FINISH: NONE
 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
 6) IDENTIFICATION: N/A
 7) WEIGHT: SEE ASSEMBLED WEIGHTS.

DESIGN	JPH	DART AEROSPACE LTD	
DRAWN	SC	HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. D
MFG. APPR.		D4277	SHEET 3 OF 3
APPROVED		TITLE	SCALE
DE APPR.		RIBS	NTS
DATE	11.02.09	COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

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FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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